## **CERTIFICATE OF MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in n envelope addressed to:

> "Commissioner for Patents, Alexandria, VA 22313-1450"

June 23, 2003

**KEVIN J. STEIN** 

Reg. No. 47,966

Attorney for Applicant(s)

**PATENT** 

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Customer No.:

000201

Attorney Docket No.: J3509(C)

Applicant: Serial No.: Johnson et al. 09/764,734

Filed:

January 17, 2001

Date of

Signature

For:

**Antimicrobial Compositions** 

Group:

1616

Examiner:

A. Pryor

Edgewater, New Jersey 07020

June 23, 2003

## **RESPONSE**

Commissioner for Patents Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated March 21, 2003, please consider the following response:



I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an velope addressed to:

> "Assistant Commissioner for Patents, Washington, D.C. 20231"

KEVÍN J. STEIN Reg. No. 47,966 Attorney for Applicant(s)

06/23/03 Date of Signature

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ASSISTANT COMMISSIONER FOR FIXTENTS 1600/290

Edgewater, New Jersey 07020

June 23, 2003

UNITED STATES DEPT. OF COMMERCE

Patent and Trademark Offic

**Assistant Commissioner for Patents** Washington, D.C. 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

No additional fee is required.

The fee has been calculated as shown below.

## **CLAIMS AS AMENDED**

	(2) * Claims Remaining After Amendment		(4)** Highest No. Previously Paid For	(5) Present Extra	(6) Rate	(7) Additional Fee
Total Claims		Minus			\$ 18.00	
Independent Claims		Minus			\$ 80.00	
Multiple Claims					\$ 270.00	·
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$	

<sup>\*</sup>If the entry in Column (2) is less than the entry in Column (4), write "0" in Column (5).

to Deposit Acct. #12-1155. Triplicate copies of this letter are enclosed.

[X] The Commissioner is hereby authorized to charge any additional fees, which may be required to our deposit account No. 12-1155, including all required fees under

[X] 37 C.F.R. § 1.16;

[X] 37 C.F.R. § 1.17;

[X] 37 C.F.R. § 1.18.

Triplicate copies of this letter are enclosed.

KJS/sa 201) 840-2394

Kevin J. Stein Registration No. 47,966

Attorney for Applicant(s)

**BEST AVAILABLE COPY** 

<sup>\*\*</sup>If the "Highest No. Previously Paid For" is less than "20," write "20" in this space.